

Endline Mystery Client Survey Among Network Providers

Saathiya Program

25 November, 2011



Structure

- Research Objectives
- Methodology
- Findings
- Recommendations



Research Objectives

 What is the proportion of providers following standard protocols?

• Is it below or above the benchmark?



Protocols and Benchmarks

S.No	Protocols	Benchmark
1	Provider proactively discussed FP with client	20%
2	Appropriately screened for any FP method	
3	Discussed at least two FP methods	
4	Asked client to choose a method	
5	Discussed about the common side effects	
6	Discussed about the usage information	60%
7	Discussed about the advantage and disadvantage of the method	50,0
8	Family planning materials present at the clinic	
9	Saathiya materials present at the clinic	



Target Groups

ISMHs belonging to Saathiya provider network



Program and Research Areas

- Program Area:
 - 7 towns of UP and Uttarakhand

- Research Area:
 - All 7 towns : Agra, Allahabad, Barabanki,
 Dehradun, Haridwar, Lucknow, and Varanasi



About the Survey

Survey implemented by Sigma

Field work conducted during Sept-Oct 2011

Mystery Client with an exit interview

• Sample: 101 ISMHs



Mystery Client Scenario

 Currently married woman (18-24 years), with a child of one year

Visiting provider with a complaint of headache

 If the provider does not broach the topic of FP, she enquires about the spacing method on her own

Does not want to have a child in the next 1-2 years



Key Findings



PMP Indicators

- Percent of providers pro-actively broaching the subject of FP with mystery client
 - Target: 20% network ISMHs
- Percent of providers mentioning side effects spontaneously to mystery client
 - Target: 60% network ISMHs



PMP indicators

Indicator	Value	Benchmark	Remark
Percent of providers pro- actively broaching the subject of FP	26.7%2	20%	Significantly* above the benchmark
Percent of providers mentioning side effects of (Oral Pills) spontaneously	76.9% ¹	60%	Significantly* above the benchmark

1: Providers discussing oral 2: All providers = pills in detail on their own = 101

^{*:} Significantly (p<0.05) different from baseline



Screening for FP method and informed choice



Screening and Informed choice of FP methods

Indicator	Value	Benchmark	Remark
Appropriately screened ¹ before discussing FP method	60.4		Meeting the benchmark
Discussed at least two modern temporary FP methods	68.3%	60%	Significantly** above the benchmark
Asking client to choose a method	74.3		Significantly* above the benchmark

¹ Screening questions: # of children, any child in future, age of the youngest child

^{*:} Significantly (p<0.05) different from baseline

^{**:} Significantly (p<0.10) different from baseline



Majority of the providers talked about oral pills in detail on their own

FP Methods	FP methods mentioned on his/her own	FP method discussed in detail
Pills	89%	90%
Condoms	30%	25%
IUD	51%	48%
Injectable	49%	38%
Sterilization	5%	1%
Emergency Contraception	13%	13%
Safe Days Method	11%	-
Withdrawal	2%	-
LAM	2%	-



Oral Pills



Key Advantage & Disadvantage of oral pills

Areas of discussion	Providers
Key Advantage	
It reduces pain and bleeding related difficulties during periods	68.1% ^b
Key Disadvantage	
Have to remember to take one tablet everyday	94.5% ^b

Providers discussing oral pills in detail on their own = 91

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Usage information about oral pills discussed and above the benchmark

Areas of discussion	Providers
Take one pill everyday	96.7% ^b
Pill can be started any day between first to fifth day of the period	72.5% ^b
If a women misses one pill, she should take it soon as she remembers	63.7% ^b



Common side effects of oral pills discussed and above the benchmark

Areas of discussion	Providers
Common side effects are nausea, vomiting, irregular bleeding	76.9% ^b
These side effects are not harmful and usually go away in 2-3 months	62.6 ^b



Personal Assurance, Saathiya signage and information materials



A high proportion of providers give personal assurances

Personal assurance	Providers
Doctor asks to return in case of any problem	86.1%
Doctor assures that the patients can visit anytime if they have any questions	78.2
Doctor gives adequate time during consultation	89.1
Doctor provides the saathiya helpline number	30.7



Clinic signage and Information Material

Signage & Information Material	Providers ^b
Had Saathiya signage inside or outside clinic	88.1%
Had any client information materials related to FP	80.2%
Had any client information materials related to FP from Saathiya	80.2%
Had wall chart on FP method from Saathiya	91.1%
Had any FP poster from Saathiya	100%



In Sum (1)...

- Met the PMP indicators
 - 27% of providers pro-actively broached the subject of FP with mystery client. It is above the benchmark (20%)
 - 77% of providers mentioned common side effects of oral pills to mystery client and is above the benchmark (60%)



In Sum (2)...

- Informed choice being provided; significantly above benchmark
 - Providers who discussed at least two modern temporary methods: 68%
 - Asked the client to choose a method: 74%
- Proportion of providers who screened clients appropriately before discussing FP methods met the benchmark
- Main FP methods spontaneously discussed in detail were: oral pills (90%); IUD (48%) & injectable (38%)



In Sum (3)...

- Majority of providers discussed key advantage, disadvantage, usage information and side effects of oral pills. It is above the benchmark
- Majority of providers offered personal assurances: 'return in case of any problem' or 'visit anytime in case of any question'
- More than 80% of providers had Saathiya signage board at their clinic at the time of study
- More than 80% of them had FP information materials such as posters, wall chart, provided by Saathiya, displayed at the time of the study



Recommendations (1)

- Program has motivated a substantial proportion of ISMH providers to address the 'missed opportunity'. Building on this will further enhance the potential of these providers in contributing to FP use.
- Further studies are required to understand the profile and motives of the providers who are addressing the 'missed opportunity' so as to inform the program's targeting and provider motivation strategies.



Recommendations (2)

 The mystery client scenario needs to be reviewed since a 'headache' may be due to reasons like hypertension and could contraindicate some specific FP methods. Alternative scenarios should be explored.



Thanks